Date of this Submission (MM/DD/YYYY): **11/18/2003**

HHS Agency (OPDIV): **CMS**

Title of System or Information Collection: **Payment Quality Review System (A system family containing**

11 systems)

Is this System or Information Collection new or is an existing one being modified? **Existing**

Identifying Numbers (Use N/A, where appropriate)

Unique Project Identifier Number: **BPA 98-0222 –(DPP)**

System of Records Number: **09-70-0527 (FID), 09-70-0534**

OMB Information Collection Approval Number and Expiration Date: **OFM244 (DPP)**

Other Identifying Number(s): **N/A**

Description

1. Provide an overview of the system or collection and indicate the legislation authorizing this activity.

    CMPTS - This is a database that captures overview information on civil money penalties (CMPs) imposed by CMS and the respective monetary collections. No legislation authorized this activity (see 3 below).

    DPP receives paid claim data from insurance companies to determine if duplicate payment has been made.

    The Fraud Investigation Database (FID) is a nationwide database directed to the accumulation of instances of potential and actual Medicare fraud and abuse cases, and the tracking of Medicare payment suspensions.

    IRP Tracking System - Download of complaints of fraud from the DHHS system. Loaded on the Metaframe server and distributed electronically to Medicare contractors and CMS Regional Office staff.

    The MRS collects costs and savings information on the Medical Review activities of Medicare carriers. It requires that Medicare carriers report quarterly and provides CMS and Medicare carriers with summaries of the cost and savings information reported. This system is authorized by the Social Security Act of 1965.

    The PORS System is an online, CICS based system that collects Medicare overpayment information. This information is entered, online by Medicare Contractors once an overpayment has been determined.

    PPRMS is a Congressionally mandated system that collects and analyzes physician/supplier and carrier claims data from the NCH SUM system in order to produce reports for trends analysis concerning physician access nationally.

    PSOR - Tracks Part B overpayment and collections.

The RBS collects costs and savings information on the Medical Review activities of Medicare Fiscal Intermediaries (FIs). It requires that Medicare FIs report quarterly and provides CMS and Medicare FIs with summaries of the cost and savings information reported. This system is authorized by the Social Security Act of 1965.

MPARTS - Information is collected to track the status of reimbursement for Medicare over-payment.

HGTS - The HIPAA allowed for a reliable source of funding for Medicare anti fraud and abuse efforts. Among those efforts were the DHHS, AOA Harkin Grantee Senior Patrol Projects. The HGTS allows for effective tracking of Medicare complaints generated through the Projects. Summary reports based on results are distributed to the OIG and CMS.

2. Describe the information the agency will collect and how the agency will use the collected information.

CMPTS - Explain how the data collected are the minimum necessary to accomplish the purpose for this effort. The agency collects the following information: provider identification, type and specific of violation, information on the CMP imposed including monetary amount imposed and collected.

DPP receives paid claim data from insurance companies to determine if duplicate payment has been made. Only the minimum (paid claim) data is requested to accomplish the analysis.

FID - The agency accumulates information on cases of potential Medicare fee-for-service fraud and on payment suspensions.

IRP Tracking System - Download of complaints of fraud from the DHHS system. Loaded on the Metaframe server and distributed electronically to Medicare contractors and CMS Regional Office staff.

MRS - CMS will collect information concerning the costs and savings for Medicare carriers. The Agency will use the information to make management decisions regarding the Medicare MR program. CMS is confident that the data collect are the minimum necessary to accompl9ish this purpose because we have used the system for the past 10 years for those purposes and have found the system adequate for most purposes. We have reviewed the MRS and have determined it needs to be expanded to allow better management of the MR program at the contractor, Regional Office, and Central Office level. We plan to replace the MRS with the improved system, the Program Integrity Management Reporting system, in April 2004.

PORS - The information collected includes the amount of the overpayment, the Medicare Contractor responsible for the overpayment, the date the overpayment was determined, the amount of recoupments, if any, and the remaining balance of the overpayment.

PPRMS - The information analyzed is NCH SUM system RIC-M and RIC-O claims. The information is used to conducted detailed analyses on physician access and physician access trends in the US. Any data that is not necessary to this analysis is not saved for the output from the input SUM files. The data that is not used includes PII data.

PSOR - This system collects Part B overpayment at collection (i.e., recovery) information. A minimal level of data is collected due to privacy consideration.

RBS - CMS will collect information concerning the costs and savings for Medicare FIs. The Agency will use the information to make management decisions regarding the Medicare MR program. CMS is confident that the data collected are the minimum necessary to accompl9ish this purpose because we have used the system for the past 10 years for those purposes and have found

the system adequate for most purposes. We have reviewed the RBS and have determined it needs to be expanded to allow better management of the MR program at the contractor, Regional Office, and Central Office level. We plan to replace the RBS with the improved system, the Program Integrity Management Reporting system, in April 2004.

MPARTS - Information collected pertains to claims paid by Medicare when a primary insurer should have paid the claim. Data collected is the minimum necessary. No identifiable data is present on the file.

HGTS - Medicare contractors download results of pending/closed cases and send reports to the OIG/CMS.

3. Explain why the information is being collected.

   CMPTS - This is an internal informational database for CMS use only and is used to keep track of the penalties imposed by CMS.

   DPP receives paid claim data from insurance companies to determine if duplicate payment has been made.

   FID - The information is collected in order to track potential cases of Medicare fee-for-service fraud or abuse and payment suspensions imposed where an overpayment or fraud is suspected. The agency uses the information to track cases, trends, and outcomes.

   IRP Tracking System - To aid in fraud investigations by electronically recording complaints.

   PORS - Collection of this information will provide a means for both CMS and Medicare Contractors to monitor the number and amount of all current overpayments.

   PPRMS - The information is being collected in order to facilitate analyses of physician access and physician access trends in the US over time.

   PSOR - To track Part B overpayments and collections.

   MPARTS - Information is collected to track the status of reimbursement to Medicare by primary insurers.

   HGTS - To assist in determing Medicare fraud and abuse and assist the Medicare contractors in their fraud investigations.

4. Identify with whom the agency will share the collected information. Information is not shared outside of CMS.

   DPP - Medicare contractors.

   FID - The agency will share the information with the Office of Inspector General, the Federal Bureau of Investigation, the Department of Justice, the Medicaid Program Integrity Directors, and the Medicaid Fraud Control Units.

   IRP Tracking System - Medicare contractors, OIG investigators, FBI.

   PORS -The information is shared by CMS, Medicare Contractors, and The Department of Justice.

PPRMS - The information will be shared with Congress.

PSOR - CMS Regional Offices and Medicare carriers.

MPARTS - Information is shared with Medicare contractors and other federal agencies.

HGTS - Other Medicare contractors, the OIG Investigations staff, the Federal Bureau of Investigations.

5. Describe how the information will be obtained, from whom it will be collected, what the suppliers of information and the subjects will be told about the information collection, and how this message will be conveyed to them (e.g., written notice, electronic notice if a web-based collection, etc.). Describe any opportunities for consent provided to individuals regarding what information is collected and how the information will be shared.

CMPTS - Information regarding CMPs are imputed by CMS Ros. Collections information is inputted by OFM in CO. All other questions are n/a.

DPP receives paid claim data by tape from insurance companies to determine if duplicate payment has been made. If a duplicate payment is detected, the appropriate Medicare contractor will be notified and will initiate recovery.

The FID information is entered by one of the following two groups: Medicare program safeguard contractors and Medicare Durable Medical Equipment Regional Carrier benefit integrity units. By it's nature, the subjects of potential fraud investigations are not generally advised that they are under scrutiny. The information itself is information that a Medicare carrier or intermediary would maintain on a provider or supplier that has billed the Medicare program for reimbursement, and includes all available identifying pieces of information given by that provider or supplier on their enrollment application and/or their bill or claim for payment. Information in the FID could also include summary of findings from Medical or other review of submitted and/or paid claims.

IRP Tracking System - Downloaded from 1-800-HHS-TIPS hotline complaints and transmitted to Medicare contractors for investigation development. The DHHS staff and contractors are responsible for notification to complainants and safeguarding the original complaint information.

PORS - The information is collected online from Medicare Contractors.

PPRMS - The information is obtained from the NCH SUM system. The administrators of this system are aware of this system's access through RACF permissions and profiles.

PSOR - Information is obtained from post-payment review and is collected from providers. It is conveyed by written demand letter.

MPARTS - Information is obtained from an approved Medicare contractor.

HGTS- Information will be obtained from the Harkin Grantee Senior Patrol Projects and loaded into the HGTS by Medicare contractors.

6. State whether information will be collected from children under age 13 on the Internet and, if so, how parental or guardian approval will be obtained. (Reference: Children's Online Privacy Protection Act of 1998)
No, this information is not being collected.

DPP - Only if the child billed Medicare as the primary payer in error.

7. Describe how the information will be secured.

    CMPTS, FID - Users need a valid CMS user id and password to access the system. User ids and passwords are authenticated through CMS.

    DPP - The incoming tapes are on housed on the CMS mainframe.

    IRP Tracking System - Systems server protection, user ID, RACF form submission for access.

    PORS - Information is secured though restricted access to the POR System, which only allows authorized users access to their own data.

    PPRMS - Information is secured through RACF.

    PSOR - ID and password are required to enter the system. Normal CMS Data Center physical security applies.

    MPARTS - Information is stored on the CMS mainframe in the CMS Data Center.

    HGTS - System server protection; user ID/ password, RACF for submission and approval for access.

8. Describe plans for retention and destruction of data collected.

    CMPTS, FID - There are specific retention and destruction plans. The system follows the standards set at the CMS datacenter.

    The incoming tapes are on housed on the CMS mainframe.   There is currently no plan to destroy any DPP data. Ever.

    IRP Tracking System - Data is transferred to a holding CD on the server after 3 years. The CD is secured by lock and key.

    PORS - The current requirement for retention of this data is 10 years. After10 years, the data is deleted from all files.

    PPRMS - Data produced through this system is maintained for the maximum lifespan duration in order to facilitate historical analyses and traceability of results.

    PSOR - Information is retained in VSAM files on the CMS mainframe and stored indefinitely.

    HGTS - The information in this system family do not contain personally identifiable information within any database(s), record(s), file(s) or Document(s) located on the system.

9. Identify whether a system of records is being created under section 552a of Title 5, United States Code (the Privacy Act), or identify the existing Privacy Act system of records notice under which the records will be maintained.

    System of Records : 09-70-0534 and 09-70-0527

Endorse

___/s/_____
J. Ned Burford
CMS Privacy Officer

Date __11/21/2003_____

Endorse

___/s/_____
Timothy P. Love
Chief Information Officer

Date: __11/21/2003_____

Approve

____/s/_____
Thomas A. Scully
CMS Administrator

Date: _11/21/2003_____